

16367 U.S.PTO  
011404Patent  
Attorney Docket No. 895,675-195

To: Mail Stop Patent Application  
Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

17497 U.S.PTO  
10/758477  
011404**NEW APPLICATION TRANSMITTAL****UTILITY**

Sir:

Transmitted herewith for filing is a **utility** patent application:**Inventor(s):** Anuja Nair, D. Geoffrey Vince, John D. Klingensmith, and Barry D. Kuban**Title:** SYSTEM AND METHOD FOR DETERMINING A TRANSFER  
FUNCTION**1. PAPERS ENCLOSED HEREWITH FOR FILING:**

13 Page(s) of Specification  
9 Page(s) Claims  
1 Page(s) Abstract  
4 Sheets of Drawings  Informal  Formal

**2. ADDITIONAL PAPERS ENCLOSED IN CONNECTION WITH THIS FILING:**

Power of Attorney  
 Declaration  
 Assignment to THE CLEVELAND CLINIC FOUNDATION and assignment cover sheet.  
 Request and Certification under 35 U.S.C. § 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35  
 Priority Document No(s): \_\_\_\_\_  
 Information Disclosure Statement w/PTO 1449  References

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CERTIFICATE OF MAILING (37 C.F.R. §1.10)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as 'Express Mail Post Office To Addressee' (Label No. EV337190116 US) in an envelope addressed to the Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450.

January 14, 2004  
Date of Deposit  
IRI:1051116.1

Cynthia B Pacheco  
Cynthia B. Pacheco

Preliminary Amendment

**3. THE FILING FEE HAS BEEN CALCULATED AS SHOWN BELOW:**

<b>BASIC FILING FEE:</b>				\$770.00
Total Claims	34	- 20	= 8 x \$18	252.00
Independent Claims	3	- 3	= 0 x \$86	0.00
Multiple Dependent Claims			\$270 (if applicable)	0.00
<b>TOTAL OF ABOVE CALCULATIONS</b>				<b>\$1,022.00</b>
Reduction by ½ for Filing by Small Entity. Note 37 CFR 1.9, 1.27, 1.28. If applicable, Verified Statement must be attached.				\$511.00
Misc. Filing Fees (Recordation of Assignment)				
<b>TOTAL FEES SUBMITTED HEREWITH</b>				<b>\$511.00</b>

**4. METHOD OF PAYMENT OF FEES**

A check in the amount of \$0.00.

Charge Deposit Account No. **50-2862** in the amount of \$ 511.00. A duplicate copy of this document is enclosed for processing purposes.

This application is being filed without fee or Declaration under 37 CFR § 1.53

**5. AUTHORIZATION TO CHARGE FEES TO DEPOSIT ACCOUNT 50-2862**

37 CFR 1.16(a)(f) or (g) – (Filing fees)

37 CFR 1.16(a), (c) and (d) – (Presentation of Extra Claims)

37 CFR 1.16(e) – (Surcharge for filing the basic filing fee and/or Declaration on a date later than the filing date of the application)

37 CFR 1.17 – (Any Application processing fees)

Credit Deposit Account No. **50-2862** for overpayment of fees

Respectfully submitted,

O'MELVENY & MYERS LLP

Dated: January 14, 2004

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